215037904 60647			State of Nebraska Investigator's Motor Vehicle Accident Report Sheet 1 of 2															
2	Total Numl	nei l	Local No./ District 072 Agency Case No. B5-086374						ŀ	HIT & RUN		NVESTIGATION MADE AT SCENE?			? L 1			
A/1 01 A/2	OF ACCIDENT C	OF CIDENT 09/17/2015 S M T W TH F S TIME OF ACCIDENT 1752																
В	OF ACCIDENT	тү П	_incoln								PRIVATE	YES NO	09/17		15			
87	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. 17th and O St						ONE-WAY YES NO STREET?			LATITUDE								
с 1	DISTANCE FROM FEET N S E W OF MILEPOST						HIGHWAY NO.			<u> </u>	LONGITUDE			1				
D	IF AT INTERSECTION IF NOT AT INTERSECTION																	
1 ∇1/M	NAME OF INTERSECTING ROADWAY FEET MILES N S E W OF NEAREST STREET, BRIDGE, RAILROAD CROSSING 17th and O St																	
10 V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN MILES N S E W AND MILES N S E W OF NEAREST CITY OR TOWN																	
E 2	R. WORK ZONE TO STATE DEPT. OF ROADS' PROPERTY? CODES S. PEDESTRIAN S1 S2 S3 S4 S5-a S5-b S6-a S6-b S1ATE DEPT. OF ROADS' PROPERTY? CODES STATE DEPT. OF ROADS' PROPERTY? YES X NO																	
F	DRIVER		n H13318	2201		VI	HICLE	NO. 1				STATE	NE	SE	_v 🗘	() FEMALE		
1 V1/N	DRIVER HENRIET	TE .	o.)Z91					PHONE 402-9	975	5-0965	(Of License)	LOCAL N			MALE		
2 V2/N	1812 B ST APT 3. LINCOLN, NE 68502									V1/								
2	WNER MEMPHIS MENSAH PHONE 402-975-0965 LOCAL NO. V1/2										-							
^G 4	OWNER ADDRESS CITY, STATE, ZIP CITATION X YES CITATION I BA12 B #3, Lincoln, NE 68502 CITATION I LB472										V1/	/3						
н 5	LICENSE PA NO. TJW707							YEAR (Plate Expires) 2016				STATE (Of Plate) NE		NE				
V1/O	VEHICLE	vehicle 2001 Make Model Caravan				Mini v		color silver / chrome					V1/	'4				
2 V2/O	VEHICLE ID NO. (VIN) 1B8GP25331B217441					Forsyth Insurance Agency Policy No.						V1/ — 1 8						
2	TOWED TO				TOWED BY							34-294-00					V1/ 2	/6
1	DRIVER	N	o. H13469	252		VI	HICLE	NO. 2				STATE	NE	SI	= x ⊊	FEMALE MALE	_	
V1/P	DRIVER BRENT BONFLEUR Of License NE SEX S						MALE	V2/	/1									
1 V2/P	DRIVER ADDRESS 5809 BERKELEY DR APT 6, LINCOLN, NE 68512 CITY, STATE, ZIP MATE OF BIRTH (MM / DD / YYYYY) 04/26/1994							1	8									
1	OWNER PHONE LOCAL NO. 402-450-3942								V2/	/2								
^J 01	OWNER ADDRESS CITY, STATE, ZIP 133 MILLER ST, WHITECLAY, NE 69365 CITATION YES CITATION YES OND PENDING NO							V2/	/3									
V1/Q	LICENSE P	A N	o. 61E61								YEAR ate Expires)	2016		STA (Of Pl	late)	NE	V2/	/4
V2/Q	VEHICLE	YEAR	2003	Ford	1	TAURUS	S	4 doo	r Seda	n	gray		STIMATED I			0	V2/	/5
4 K	VEHICLE ID NO. (VIN)	1FAFP55293G138523						INSURANCE COMPANY STATE FARM					1 V2/					
02								POLICY NO 101 5	101 5469-C26-27A					2				
(Complete a continuation report, if more than three were injured)								OF BIRTH	Seat Position	2 Eject	Body Region	Injury n Sev. T	rans.	SEX M F				
VEH. #	NAME			AD	DRESS													
	LOCAL NO.	OCAL NO. MEDICAL FACILITY NAME					EMS SERVICE NAME					EMS RU	N REPO	ORT NO.				
VEH. #	NAME			AD	DRESS		<u>'</u>											
	LOCAL NO.		MEDICAL FACILITY I	NAME			EMS SI	ERVICE NAM	E	1			EMS RU	N REPO	ORT NO.			
VEH. #	NAME			AD	DRESS											\prod		
	LOCAL NO. MEDICAL FACILITY NAME EMS SERVICE NAME EMS F							EMS RU	N REPO	DRT NO.								

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS											
	THE TOLLOWING	INDICATE BY DIAGRA	AGENCY CASE NO. B5-086374	SENCY CASE NO.							
				D3-000374							
Indicate North by Arrow											
		50'	•								
			17th Street								
	. 1		O Street								
		APOI									
	. 69' 5"		69' 3"								
				·							
			POI NOT MEASURED CCIDENT OCCURRED SOMEWHERE INTERSECTION OF 17TH AND O S OTH VEHICLES MOVED PRIOR TO OF	ST							
	NOT TO SCALE	50' 2"	ARRIVAL								
DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION Driver 2 stated he was operating V2 NB on 17th St at O St in the far left lane at 25 mph. DRIVER 2 stated V1 was also NB on 17th at 25 mph in the very											
, , ,			St at 25 mph in the 2nd lane fror which was proceeding NB on 17th								
OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE		APPROX. COST OF DAMAGE						
OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE		APPROX. COST OF DAMAGE						
NAME		ADDRESS	PHO	PHONE							
NAME NAME		ADDRESS	PHO	DNE							
VEHICLE MOVEMENT BEFORE COLLISION	POINT OF IMP MOST DAMAG	,101,1112	DEPLOYED RESTRAINT U ICLE 1 VEHICLE 1	SE TOTAI							
VEH NO. N S E W ROAD OR HIGHWAY NAMI	Enter numbers for	each vehicle)		ALCOHO							
1 X 17th	VEHICLE 1	VEHICLE 2 4		ALCOHOL	V V						
2 X 17TH	IMPACT UO	POINT OF IMPACT 02 1 Deployed 2 Deployed 2	side 3 Shoulder belt only us	occupant TESTED used	N X N X N						
1 06 06 Turning left 07 Making U-tu 08 Entering	DAMAGED 07	AREA 02 3 Deployed 4 Not deploy 5 Not applic	both front/side 4 Lap belt only used 5 Child safety seat use	ed ALCO	DHOL/ Driver No. 1 No. 2						
01 Essentially 09 Leaving	00 None 02 09 Top & windows	No airbag	available 7 DOT approved helme 8 Costume helmet user 9 Restraint use unknow	d SUSPI	ECTED I I						
straight ahead traffic lane 02 Backing 10 Parked	10 Undercarriage 01 - 11 Total (all areas)	05 VEHI	CLE 2 VEHICLE 2	2 Yes - al	alcohol nor drugs suspected cohol suspected						
03 Changing lanes 11 Slowing or 04 Overtaking/ stopped in t Passing 12 Other	` ′ ′	07 06 - 4	- 2		rugs suspected cohol & drugs suspected vn						
05 Turning right 13 Unknown OFFICER NO. 1621	TROOP/ TEAM/ BEAT NE	DEPARTMENT Lincoln Police		Photographs YES taken? NO							
INVESTIGATOR NAME (Print or Type Christopher Schamb		INVESTIGATOR SIGNATURE Approved by Officer C		DATE OF REPORT 09/17/2015							